Group Dynamics in Aviation/ Integration of the F.S. into the Squadron

CDR Mark Mittauer

Group Dynamics in Aviation

Introduction

- Group dynamics influence the behavior of individual members

  note: group may mean a squadron, aircrew in one aircraft, etc.
- Individual aviators assume a variety of roles (professional and personal) in a group - that change over time

Introduction (cont.)

- These roles:

  a) affect how the aviator is perceived

  b) enable the aviator to influence the group

- The flight surgeon is more effective if he/she understands these dynamics

Roles an Aviator may Assume in a Squadron

- operational assignment (ex. pilot-in-command, section lead, mission cmdr.)
- administrative assignment (collateral duty)
- mentor
- friend
- romantic partner
- social position (ex. “party animal”)

Individual Characteristics Influence Others' Behavior

- flying experience (could be negative influence if one ignores checklists, SOP)
- integrity/trustworthiness
- personality style:
  - avoidant - unassertive in emergency
  - narcissistic - demands attention; "pouts
- appearance - attractive people are perceived as > intelligent and capable; may get extra attention from instructors

(Cont.)

- gender/race:
  - women and minority males may not be accepted as readily - leading to lower morale and self-esteem
  - women may experience male instructors as either more, or less, demanding
  - women may encounter hostility and unwelcome sexual advances

(Cont.)

- The individual has more influence on the group if he/she shares common characteristics with the group
- The flight surgeon will have more credibility *as a physician* if he flies and lives with the squadron members and studies about flying (ex. takes NATOPS exams)

Cockpit Configuration Influences Behavior

- Side-by-side seating:
- EA6B, P-3, S-3, helos (CH-46, CH-53)
- Crewmember in left seat is “dominant”, but there is more equality than in tandem (front-and-back) seating
- advantage - more effective communication as both auditory and visual exchanges occur
- problem - creates (and reduces) anxiety

(Cont.)

- Tandem (front-and-back) seating:
- Cobra, F-18, F-14, T34C “Radial Interceptor”
- potentially less communication (auditory only)
- may create isolation or paranoia

  (ex. one crewmember is less talkative)

Mission (Role) Influences Behavior

- The pilot's "stick" and the NFO's radar "scope" are symbols of authority - and may create a power struggle
- In two seat fighters - the RIO "runs the show" (navigates and communicates) prior to the "merge" (dogfight), then the pilot assumes control
- In the P-3, the TACO (RIO) is in charge of the mission

(Cont.)

- Radar operators (enlisted or junior officers) control aircraft from the ground, the aircraft carrier, or airborne (ex. E2)
- This may create passive-aggressive or defiant behavior (by the “controlled” aircraft) - that may compromise safety

Crew Composition Influences Behavior

- Rank may not match experience/skill in the same aircraft (or group of planes)

  ex. the “hot stick” (most skilled pilot) may be junior and less experienced

  note: senior officers may fly less often
- Squadron position may not match flight mission responsibility

  ex. LT (pilot) flying with Skipper (RIO)

(Cont.)

- In a multi-crew plane - an “identified leader” may wrest control from the “appointed leader” (pilot-in-command)

Group Behavior Influences Individual Behavior

- Risk-taking behavior increases:
- The group empowers the individual member - to overcome feelings of inadequacy

  why? - risk-taking is a desirable social value

  - the media highlights national heroes and film/TV action figures who are risk-takers

(Cont.)

- A group collectively assumes more risk than an individual

  why? - diffusion of blame for a bad outcome

  - feelings of anonymity in a group

- <u>Conformity increases:</u>

  why? - the group rewards conforming behavior in new members

(Cont.)

- Loss of inhibition increases:
- The group overrides an individual's maintenance of socially acceptable behavior
- A crewmember is more likely to make the same bad or incorrect decision as his peers

Group Culture

- Each squadron has a distinct “personality style” that evolves over time
- Squadron achievements and lore are passed down through the “corporate memory” with (perhaps) embellishment
- The squadron reputation bonds and motivates the members and boosts morale (ex. jet vs. helo “slow movers”; fighter “jocks” vs. attack “pukes”)

Group Rituals

- Each squadron has rituals (formal and informal) that reinforce the group identity
- Call signs (nick names) remind the aviator of his place in the “pecking order”

  note: new FS called “Quack”
- The squadron may have initiation rituals (good-natured ridicule)

Unique Aviation Group Behavior

- The "jackal" phenomenon:
- A squadron member may be "extruded" when he oversteps acceptable behavior standards (formal and informal)
- The flight surgeon may be asked to medically "dispose" of the member

Flight Surgeon with "Jackals":

- Maintain your professional integrity
- Insist on extensive documentation
- Consult (senior or group flight surgeon; NOMI Psychiatry)
- Handle administratively if appropriate (ex. FNAEB, FFPB, HFB)
- Psychiatric referral only if appropriate (use SECNAVINST 6320.24A - Boxer Law)

Squadron Reaction to Death

- Normal grief stages: shock, disbelief, denial, sadness, acceptance
- Healthy defenses: rationalization, suppression, compartmentalization, “gallows humor”
- “Wake for a day”: allows rapid integration of the mishap and return to “business as usual” (flying)

Squadron Death (cont.)

- The flight surgeon should watch for unhealthy behavior: projection of blame, “splitting”, survivor guilt, excessive denial, “acting out” (alcoholic binges)
- Consider requesting a Critical Incident Stress Debrief (CISD)
- CISD available via chaplains, Family Service Center, local Mental Health Department, SPRINT Teams

Surgeon into the Squadron

Desired Qualities of the Flight Surgeon

- Be confident and comfortable with making independent medical decisions
- Know and obey the boundaries of your authority and expertise (know when to consult and refer)
- Maintain your professional medical integrity (“do the right thing” when there are conflicts of interest; document in the medical record)

The Ideal Flight Surgeon (cont.)

- Become a trusted member of the squadron:
  - dress the part (USMC uniform/grooming)
  - attend all squadron social functions
  - study NATOPS
  - visit the non-aviators and learn about their jobs

The Ideal Flight Surgeon (cont.)

- Be humble. Accept (with grace) ridicule, criticism, and initial avoidance by your aviators
- Be flexible in balancing divided loyalties to several squadrons - and between the squadron and clinic
- Be a model Naval officer. Practice “leadership by example.”

The Ideal Flight Surgeon (cont.)

- Be comfortable with aviator behavior that may violate your moral code

  (adultery, sexual promiscuity, alcohol use, coarse language)

  - maintain confidentiality
  - do not be judgmental
  - maintain your integrity
  - take action when behavior is unsafe

Challenges for the Flight Surgeon

- "Special" patients:

  ex. CO, XO, Admiral, Wing Staff

  - try to treat all patients equally

  - complete a thorough medical eval

  - consult Senior FS and peers

- Multiple responsibilities - to squadron, clinic, hospital, other squadron(s):

  - set limits; be assertive and lobby hard for adequate squadron time

Surgeon (cont.)

- Divided loyalty - to the patient and the Navy/Marine Corps:

  - inform your patient that the CO must be aware of serious medical/ psychiatric conditions that may compromise flight safety, aircrew coordination, or individual safety

  (ex. alcohol abuse, suicidal ideation)

Surgeon (cont.)

- Medical care for family members:
  - find out if it is feasible to care for your aviators' family members before you agree
  - avoid undue familiarity
  - strictly maintain your aviators' confidences!

Challenges (cont.)

- Squadron social “cliques”:
  - be available, and a friend, to all squadron officers
  - maintain confidentiality about medical conditions and personal issues of individual aviators

Finis